



Government of **Western Australia**
Child and Adolescent Health Service
WA Country Health Service



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Your new baby

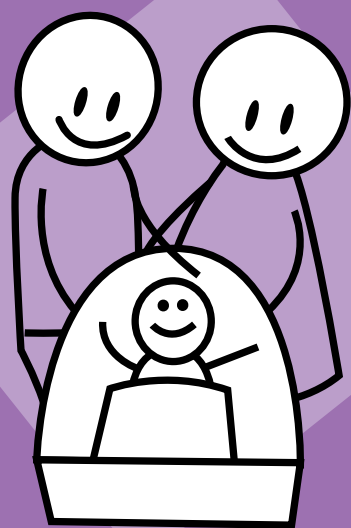
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Months

health

family

development



About this magazine

Congratulations on the birth of your baby!

The **Child and Adolescent Health Service** and **WA Country Health Service** are here to support you to raise a happy and healthy child.



This magazine includes a range of information and advice to help you through the first 4 months of your baby's life. The articles are based on current 'best practice', and have been written by experienced health professionals and reviewed by a wide range of families.

The magazine has been designed to be used together with your baby's Purple Book by providing extra background information about your baby's growth and health.

Acknowledgement of country and people

The Child and Adolescent Health Service and the WA Country Health Service acknowledge Aboriginal people of the many traditional lands and language groups of Western Australia.

We acknowledge the wisdom of Aboriginal Elders both past and present, and pay respect to Aboriginal communities of today.

Have your say

We also welcome your feedback to help us continue improving this magazine and how we work with families – see back cover.



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Child health nurses

Child health nurses are specially trained in child and family health, and work in local child health centres.

- They offer health and development checks at key stages of your child's life.
- They can assist with the many aspects of parenting and family health.
- They can link you to local services and doctors in your community, as well as hospitals and other health professionals when needed.

Your child health nurse appointments are a great opportunity to discuss your baby's health and development. The nurse will check that your baby is growing and learning new skills as expected. The visits are also a good time to talk about how you are doing – how you're feeling and coping, and any concerns you are having looking after your new baby.

We recommend you visit the child health nurse when your child turns:

- 8 weeks
- 4 months
- 12 months
- 2 years

You can also visit or contact your nurse at any other time if you are worried or have any questions.

Booking

If you live in the Perth metropolitan area you can make appointments by calling **1300 749 869** or register for an appointment at **cahs.health.wa.gov.au/PurpleBook**

If you live outside of the metro area please contact your local child health centre for a booking.

To find your local child health centre (metro and non-metro) visit **health.wa.gov.au/Services-Search**, or Google 'child health centre'.



Always bring your baby's Purple Book (All about me) to your appointments.

Drop-in sessions

Some centres offer these when you want to:

- see the nurse for a quick question
- get parenting information and support.

You don't need an appointment – your nurse will tell you about local drop-in sessions.

★ **If you think your baby is sick, you need to see a doctor. Your child health nurse cannot help when your baby is sick.**

Other services

If needed, Child and Adolescent Health Service and WA Country Health Service can offer families additional help in areas such as Aboriginal Health, Child Development and school health.

You can also self-refer to the Child Development Service if you have concerns about your baby's development (see page 10).

Parenting groups

Ask your nurse about free parenting groups in your area, or visit **cahs.health.wa.gov.au/ParentingGroups** (Perth metropolitan area).

The groups are a great way of meeting other people with babies and sharing experiences.

Early parenting group (newborn up to 12 weeks)

Meet other parents in your area with newborn babies in an informal group. These free weekly sessions last between 1 and 2 hours for 4 to 6 weeks.

The groups are run by child health nurses, and cover topics such as feeding, sleep and settling, play and development, and becoming a parent.

Playgroups

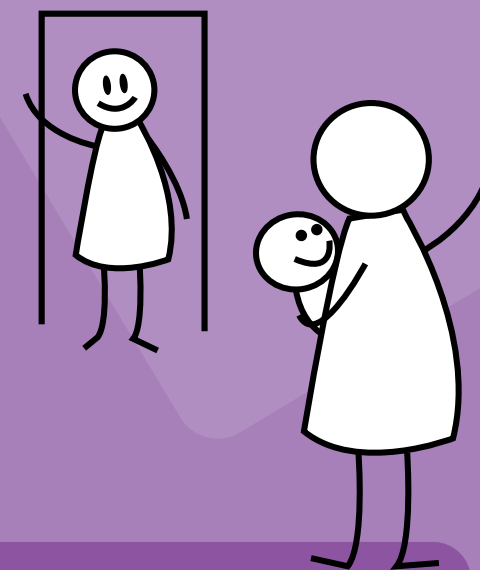
A playgroup is a group of parents, carers and extended family who come together with their babies and young children to learn together through play.

Young babies can benefit from social experiences at an early age, plus playgroup is a place for parents to make friends and learn from each other.



Need more information or help?

- Child health nurse
- **cahs.health.wa.gov.au/ParentingGroups**
- Playgroup WA



Meet other parents in your local area with newborn babies.



Kids Health Matters provides trusted advice on common child health concerns from leading WA child health experts.



Find out more at **cahs.health.wa.gov.au/childhealthresources** or scan the QR code.



Attachment

Babies are born ready for relationships and ready to learn.

Loving and stable relationships are essential to your child's development.

Attachment is a two-way relationship between a baby and their parents (or the people who care for the baby most).

Secure attachment happens when you consistently respond to newborns with love, warmth and care.

- It provides babies with the best start in life because, through relationships, children learn how to think, understand, communicate, behave, express emotions and develop social skills.
- As babies grow up, they know they'll get support to explore and learn, and get comfort when they need it.
- They develop trust and empathy, and cope better with the ups and downs of life.

Just do your best...
you don't have to be a
perfect parent all the time.



As well as the practical care and love you give your baby, attachment develops as your baby reads your signals and you read theirs.

What makes attachment secure is the way you interact with your baby, or recognise when you missed their signals. Babies may become anxious or frustrated, or even stop trying to communicate, if they don't get any response from their parents.

Helping your baby have secure attachment

Your baby feels safe and secure when you respond and offer reassurance by making eye contact, smiling, talking to them, touching or giving a cuddle. Your baby can then relax, play, explore, and learn.



Baby's body language

Young babies use body language to show when they need you.

For example, your baby may look at you, smile and coo, or begin to reach out to touch you with their hands.

Be patient

Getting to know your baby's body language takes time – you'll be guessing at first. With time, you'll begin to understand them, and respond to your baby's needs for food, rest, love, and comfort. **Respond**

Responding to your baby's needs creates trust – it does not 'spoil' them.

If you comfort your baby when they're crying, in time, they'll learn that the world is safe (see page 22). Children with secure attachment tend to be **more independent**, not less.

Do your best

You don't have to be a perfect parent all the time. Just do your best, and don't worry if you don't always know what your baby wants.

Relax

Being calm and gentle with babies can be hard in our busy and stressful lives. Try and slow down a bit, even if it means making changes to your lifestyle. Then you can be with your baby at a pace they can cope with, and you can see and respond to what your baby needs.



i Need more information or help?

- Child health nurse
- Circle of Security (CircleOfSecurityInternational.com)
- Bright Tomorrows Parenting App
- Raising Children Network

Your baby's brain

Babies are all different and develop at different rates. Their brains and bodies develop in response to their surroundings, what they experience, as well as their family genetics.

A baby's brain begins developing through pregnancy and continues to develop for the rest of their life. The most rapid changes happen during the first 3 years of life.

Babies are born ready to learn, and their brains develop through use. Providing a caring and interesting environment with lots of different activities will give your baby plenty of ways to play, develop and learn, and practice what they're learning.

Every day, show your baby how much you love them by talking to them and listening to them. **Do this from the day they are born. It doesn't matter if they can't understand you yet, it still makes their brain grow.**

What your baby can hear and see

Newborn babies can hear – they have been listening to your voice and hearing noises from well before they were born.

- Your baby can see things clearly when they are close by.
- In the first few months, babies like to look at bright things with strong colours, stripes, dots and patterns. Your new baby



can see patterns of light and dark, but things are probably blurred.

- During the first 4 months, your baby should begin to follow slowly moving objects with their eyes. Babies learn to control their eye movements by watching gentle movement, such as leaves in the breeze, washing on the line, or you moving something slowly.
- Change your baby's position so they have different things to look at on both sides of the cot.
- Hang simple toys and pictures of faces above the cot to give your baby practice at trying to touch things. Place some safe toys within eye focus (about 20 to 30 centimetres away) for your baby to touch.
- Talk as you move about the room so your baby learns about movement, distances and directions as they see and hear you.

Faces

A big part of early learning is getting to know and remember faces.

So, look into your baby's eyes **right from the start**.

The human face is the first thing they'll get to know as your baby learns that the eyes, nose and mouth make up a face. Babies often begin to smile at familiar faces and carefully watch these faces by around 6 weeks.



Communication

Crying is your baby's first communication method, and is the main way a new baby can let you know something is wrong and that they need you.

By responding to your baby when they cry, you're showing them that you've heard them and that they matter.

Your baby will also be listening to you and watching how you talk. Talk to your baby about how they are feeling – happy, sad, angry or excited. Sing songs to your baby – they like your voice best.

By 6 or 8 weeks, your baby will begin to communicate by looking at you, cooing and making vowel sounds and, later, smiling at you. This is how babies learn to take turns with you and others.

Copying your baby's sounds also encourages them to make more sounds – the beginning of your baby having 'conversations' with you. This is the start of your baby learning to talk.

Talk to your baby right from birth and copy their sounds. Name things and talk about what you are doing. Use simple words and sentences at first.

Movement

Newborn babies' neck muscles aren't initially strong enough to hold the head, so always support your baby's head when they are being picked up and laid down, carried, dressed and bathed.

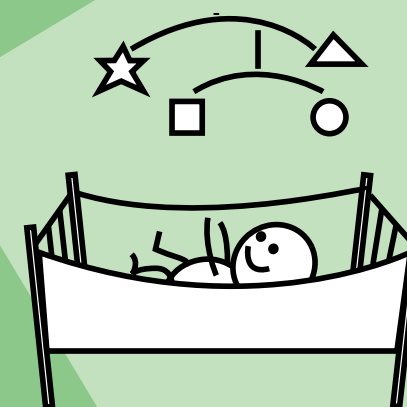
Newborn babies spend a lot of time feeding and sleeping and, in the early weeks, newborn babies have no control over their movements. Movements such as sucking, grasping something tight, sudden jerky movement when asleep, and startling when there is a loud noise or sudden movement are all reflexes.

Over time, your baby will begin to watch their hands, and bring them together and to their mouth. They are starting to learn that parts of their body belong to them and are learning to control what these do.

SAFETY!

Even though your baby can't roll, they can wriggle and kick, so never leave them alone on a high surface such as your bed or a change table.

Hang simple toys and pictures of faces above the cot.





Your baby's development

Every baby has their own feelings and personality, which you'll get to know in time.

Your baby may be very different from you. They may be easy-going and placid, or more excitable and easily upset. Even a quiet baby wants to be with you, to learn to know your voice and your face.

Every baby grows and develops new skills or milestones at different rates.

Here are some things your baby may do at the following ages:

Newborn

- turns head to suckle when cheek is touched
- holds own hands in fists, grasps your fingers if placed in their hand
- looks into your eyes and gradually starts to focus on faces
- sensitive to light, may be cross-eyed at times
- startles with loud noises
- recognises parent's voice.

4 weeks

- sucking and feeding well within 2 weeks
- lifts head briefly when on tummy and turns head from side to side
- closes eyes to bright light
- watches familiar faces during feeding and when being talked to
- responds to your voice, may move eyes towards sounds
- moves lips and tongue when you talk to them.

6 to 8 weeks

- briefly lifts head when lying on tummy, can turn head from side to side
- begins to look at their own hands, gazes into eyes and watches faces, eyes mostly move together (not cross-eyed much anymore)
- can briefly follow a slow-moving face or toy with their eyes
- turns eyes and head to sounds, may calm if they hear a soothing voice
- smiles and coos, especially when talked to
- kicks legs and moves arms strongly.

3 to 4 months

- good neck control, head steady when held in a sitting position, lifts head and chest up with arms when on tummy
- arm and leg movements become smoother
- starts to reach out for toys using both hands
- raises their arms up when they think you're going to lift them up
- watches and plays with own hands, opens and closes fist, holds rattle for a few moments when placed in hand
- turns eyes and head to sounds, quietens or smiles to familiar sounds
- very interested in surroundings and interacting with people
- laughs and babbles, smiles and makes eye contact when spoken to
- shows excited movements with familiar situations such as feeding and bathing.

If your baby is not doing some of these things, they may be 'working' on a different area of learning and development.



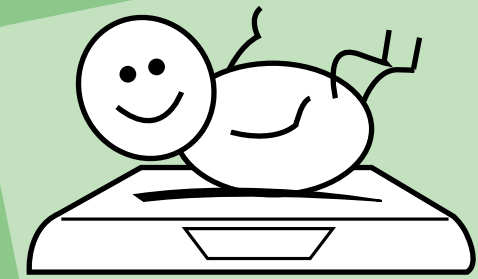
When to be concerned about your baby's development

Sometimes, babies have delays in their development, which can be short term.

You will probably be the first person to notice when things don't seem quite right. If there is a problem, it's better to get help early.

★ Contact your child health nurse or doctor if your baby:

- is not feeding well (see page 24)
- cries a lot, has an unusual cry, or unsettled much of the time (see page 22)
- is unusually 'floppy' or stiff
- moves their arms and legs more on one side than the other
- doesn't look at you or doesn't follow and react to bright colours, movements and objects
- doesn't react to loud noises by 1 month
- is not smiling back when you smile by 8 weeks
- doesn't turn their head towards a noise or voice by 3 months
- is not smiling and cooing at all by 3 months
- is always holding their own fingers and thumb in a tight fist beyond 3 months
- is not looking at own hands or playing with own fingers at about 3 months
- is not able to hold an object by 3 to 4 months



Every baby grows and develops at different rates.

- doesn't lift their head and chest when on their tummy by 3 to 4 months
- is not turning their head to search for a sound by 4 months
- stops doing new things
- seems to have an unusual head shape.
- ★ Also talk with your child health nurse if:
 - you are not sure that you understand your baby's needs, or how to respond
 - you find your baby too difficult or needy
 - your baby seems quite different to others – too tense, too calm
 - you feel unhappy or anxious a lot of the time.





How to help your baby develop

- Look into your baby's eyes – babies love to look at faces and listen to voices. If they poke out their tongue or wrinkle their nose, copy them and then wait for their reaction – this may take several seconds.
- Make your baby's world interesting during waking times. Just like you, your baby doesn't want to just lie around, looking at a blank ceiling.
 - When awake, change the way your baby is lying – such as putting your baby on their side to play, though never leave them alone when on their side or tummy.
 - Go for walks, put different things near the cot to look at, put the cot in a different room.
- Keep your baby near you when awake. Play with your baby – read, talk, sing, show them things, smile, make funny faces, change the tone of your voice when you are telling a story, massage them (see page 17).
- Babies learn best through doing things with you. Avoid screen time until after the age of 2 years. You are your child's first teacher and you build their brains through interactions with them (see page 8).
- For babies, everything is new – even nappy changing. Talk about what you do as you do it. Tell your baby when you are going to pick them up. Familiar actions, songs, and words when feeding and at bath time or bedtime help babies to know what will happen next.
- Follow your baby's lead and do what they enjoy. Babies can show you when they want to play and when they need a break.
 - When your baby's eyes are bright, and they are awake and alert, it is time to play.
 - Slow things down when they cry, turn away, or arch their back.
 - Stop when your baby wants a rest, looks away, or shows that they don't like it.

Enjoy your baby's achievements. They'll learn new things every day.

i Need more information or help?

It is easier for parents to help their baby's growth and development when life is going smoothly. However, many families go through stressful times – financial, health and emotional.

When you are feeling stressed and overwhelmed, your baby is more likely to feel tense. So, to take good care of your baby, it's really important that you take good care of yourself.

Family support services like counselling, quality child care and financial support are available in the community for parents (see page 50).

You can get more information about your baby's development and family support services from:

- Child health nurse
- Your doctor
- Ngala
- Raising Children Network
- Bright Tomorrows Parenting App
- Better Beginnings (better-beginnings.com.au)

Holding, tummy time and head shape

Holding and touching

Moving, touching, holding and carrying your new baby will help them get stronger and develop their muscles to be ready to move and play.

When you handle your baby, look into their eyes and tell them what you're going to do. This will help them feel safe and secure.

Carry your baby curled up with their arms and legs in front of them. Being curled up with their head centred in the middle helps to calm and settle your baby, and also lets them look, talk and play with you, and learn to play with their hands.

Hold your baby close and support them under their bottom and at their chest. Don't forget to support their head and neck if they need you to.

Supporting your baby's neck and head

Newborn babies haven't developed head control, so you need to help support the head and neck for the first few weeks.

Support your baby's head with your hands or fingers whenever you pick up, carry, or lay them down. As they grow stronger, let your baby practise holding their head up on their own.

Be gentle

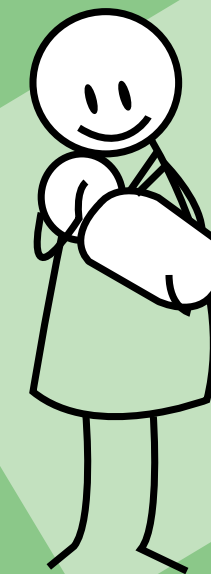
Newborn babies aren't ready for rough play.

Don't shake your baby or throw them up into the air. Shaking a baby, even in play, can damage the baby's brain.

Picking up and putting down

Place your hands under your baby's armpits, supporting their head with your fingers or hand. Slowly roll them to their side and onto your arm, then pick them up. As you pick your baby up, support them under their bottom so they feel safe.

Don't forget to support their head and neck if they need you to.



Picking your baby up in this way helps them get used to rolling and turning their head from side to side.

Lay your baby on their side to play with you, so that they can curl up, talk with you and play with their hands. This will also help them learn to enjoy being on their side and to roll when they're older.

Every time you lay your baby down, put them on their side first, then slowly roll them onto their back or tummy.

When awake, give your baby lots of 'tummy time' so that they can practise holding their head up, and help make the muscles for movement and balance strong.

Tummy time and head shape

Your baby was born with 'reflex' movements, such as automatically turning their head to search for a nipple to suck when you stroke their cheek.

Babies also learn to move in response to being touched and held.

If you put your newborn baby on their tummy on a firm surface, they'll turn their head so they can breathe. Gradually, they'll learn to hold their head up when lying on their tummy, or to lift their head forward when on their back.

Tummy time is important because it:

- helps your baby to move their neck to each side
- strengthens the muscles your baby needs for balance and movement. These include muscles in their chest, back, tummy and bottom
- helps with pushing themselves up, sitting, early rolling, getting on all fours and crawling
- means your baby isn't always lying on the back or sides of their head, which helps keep baby's head in shape.

Start short periods of tummy time from day one

Start tummy time soon after birth as a fun, daily routine. Begin with 1 to 2 minutes, a few times every day.

Place your baby, tummy down, over your thighs or on your tummy – this can be very comforting, relaxing and settling.

- Try tummy time during dressing – put your baby on their tummy for doing up and undoing buttons and gentle back massage.
- Carry your baby on their tummy along your forearm.
- Lie them on your own tummy and chest for good eye contact.

To help your baby enjoy being on their tummy, make sure their hands are in front of their shoulders. This will help them lean on their arms, lift their head and learn to reach with their arms. Your baby might like you putting a hand on their lower back and bottom.

- **Never leave your baby alone when on their tummy.**
- **Never let babies sleep on their tummies.** (See page 21 for more about Safe Sleeping.)

Your baby may find tummy time difficult to begin with

But touching, stroking, singing and talking will help your baby feel calm and safe.

Don't worry if your baby is a little fussy during tummy time. Stop and comfort your baby if they are really upset, and try another time.

Tummy time will get easier with practice – gradually increase the time as your baby grows stronger. Over time you can build up to 10 to 15 minutes, several times a day

When your baby is stronger, try tummy time on the floor.

- It's easier if your baby's elbows and hands are in front of their shoulders.
- Encourage them to lift their head by lying in front of your baby and talking.
- Even on the floor, never leave your baby alone when they're on their tummy.

Keep baby's head in shape

Because the bones of a newborn baby's skull are quite soft, babies can develop a flat spot if they spend too much time with their head in the same position.

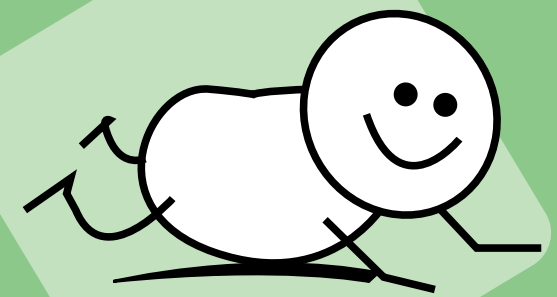
From birth

To help keep their head in shape, vary the position of your baby's head during sleep and when awake.

- Always place your baby on their back to sleep, but gently turn their head to a different side each sleep time.
- Give your baby plenty of tummy time when awake.
- Lie your baby on their side and talk to them when awake.

After the first 2 weeks:

Change the position of the cot, or put your baby to sleep at different ends of the cot so they'll have different things to look at and sleep on different sides.



Give your baby lots of 'tummy time'.



Babies like to turn their head to look towards:

- light from a window
 - the direction people come from
 - brightly coloured or moving objects such as curtains or mobiles.
- ★ If you are worried about your baby's movements or the shape of their head, talk to your child health nurse or doctor, who may refer you to the Child Development Service.

i Need more information or help?

- Child health nurse
- Raising Children Network





Play with your baby

Play is how your baby learns about themselves and their world.

Most of all, they love playing with you.

Spending time playing with your baby is just as important as feeding or washing them.

Playing with your baby right from the start helps develop your baby's:

- brain and senses (like sight, hearing, touch and smell)
- muscles and movement
- communication and social skills.

Play helps you and your baby get to know each other, and to develop a warm and loving relationship.

When you play with your baby, they feel loved, happy and safe:

- Provide a quiet, safe play space, without distractions like TVs, iPads and phones.
- Babies learn through exploring – looking, listening, touching, sucking, smelling, banging and dropping. They love lots of repetition and practice in play.
- Learn to respond to your baby's body language. Copy their noises and talk back to them.
- Make daily routines playful – bathing, nappy changing, car rides and hanging washing on the line.
- Only put out a few toys at a time – and regularly check that they are safe.
- Spend time outside – going for a walk in the pram, sitting in the garden or park, looking at flowers, trees and birds.
- Join a playgroup and toy library. Playgroups are for babies as well as toddlers.
- Visit your local library, community centre and parks.

Play ideas to help development:

Encourage your baby to play in a variety of positions, such as sitting, during tummy time, in their high chair or on your lap. Reward their play attempts by clapping, kissing, smiling, and cuddling.

Large body movements

Gently roll your baby onto their side before picking them up.

Spend time on the floor together. Give lots of tummy time (see page 14), and let your baby move and kick without lots of clothes or covers on.

Limit how much time your baby spends in prams, rockers and car seats. We don't recommend Jolly Jumpers, Bumbos and baby walkers because they can be dangerous and affect how your baby develops skills such as rolling, sitting, crawling and walking.

Vision and early hand play

Play with your baby at eye level – 'peekaboo' is a great game.

Hold your baby in front of a mirror – babies enjoy smiling and making noises at themselves.

Give your baby something safe to reach for and grasp, like your finger or a rattle. Let your baby touch objects with different textures and shapes with their hands and feet (and even mouth).

Move objects slowly from side to side so that your baby can follow them with their eyes.

Speech and language

- Respond to your baby's smiles, coos and babbling by imitating the sounds they make. Enjoy these 'conversations' with your baby.
- Look into your baby's eyes while you are talking and make expressions with your face.
- Sing nursery rhymes or other songs.
- Talk about what your baby is doing in simple language, using a 'sing-song' voice.
- Read books together – choose books with simple colourful pictures, and hold them so both of you can see.

Social behaviour

- Introduce your baby to other people – family, friends, other babies and children.
- Encourage people to respond to your baby's signals.

What if my baby doesn't want to play?

Follow your baby's signals. Babies have different levels of tolerance at different times. While some can handle lots of sound and movement all at once, others find that overwhelming.

Sometimes your baby may not want to play, especially if they're tired or hungry – or maybe they just need a short break. This is normal.

★ However, talk to your child health nurse if your baby isn't interested in playing or being with you, or other people, most or all the time.

Baby massage

Baby massage is a great way to connect with your baby. It can be very relaxing for you as well as your baby.

You don't need any special training, but you need to be gentle. If your baby seems uncomfortable, tense or upset, stop and try massaging them another time.

For more information on baby massage, including pictures and videos, visit Raising Children Network.

Screen time

Screen time describes the amount of time spent looking at all screens including TVs, computers, smartphones, tablets and video consoles.

Children under 2 years of age should not have any screen time except for video-chatting (such as Facetime or Skype).

Why limit screen time?

For healthy development, your baby needs:

- face-to-face contact to develop social skills
- to play and explore
- to learn to use their body and be active
- to be protected from images and sounds that might be disturbing.

Very young babies need the comfort and reassurance from the people closest to them, including eye contact and quiet conversation when awake.

How you can help:

- Avoid checking the phone during feeds, bathing and play times.
- Turn off the television and other screens when not in use, or when you're playing and talking with your baby.

Need more information or help?

- Child health nurse
- Playgroup WA
- Ngala
- Raising Children Network

Read books together.





Sleep

Why is sleep important?

Sleep helps your baby grow, and to learn and remember things. It restores your baby physically and mentally, and helps immunity.

Types of sleep

When we sleep, we move through cycles.

Becoming drowsy, falling asleep, moving into deep sleep then back into light sleep is called a **sleep cycle**.

Each sleep cycle is made up of 2 types of sleep:

- **Light sleep**
is when babies dream and practice new skills. You may see your baby moving around the cot during this light sleep, and may think they're awake. During light sleep, hearing is sensitive, so a dog barking or other noise can easily wake them.
- **Deep sleep**
is when your baby is resting and restoring. Babies can often sleep through loud noises during deep sleep.

A newborn baby's sleep cycle is about 45 to 60 minutes. (For adults it's about 90 minutes.)

Some babies need to learn how to go back to sleep after one cycle, so you may need to help them resettle and start another sleep cycle.

This can be tiring and stressful, and some babies take longer to learn, but it will get better.

Tired signs

Your baby will show you tired signs in lots of different ways such as:

- avoiding eye contact, rubbing eyes, having difficulty focusing or a glazed expression
- clenching fists, jerky movements, clumsiness, arching their back, or rubbing their ears
- being grizzly, unhappy, frowning, yawning or crying.

It can be harder to get your baby to sleep when they are overtired.

Try to respond to your baby's early tired signs, with a regular and soothing bedtime routine to show it is bedtime.

How much sleep does my baby need?

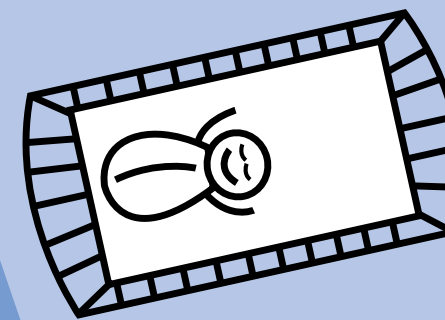
You may worry that your baby doesn't sleep enough.

- Babies are individuals (just like you) and don't have to fit into any sleep, awake and feeding patterns.
- Your baby's sleep pattern takes time to develop – you can't speed it up.
- **Newborns** sleep in cycles of about 45 to 60 minutes.
 - They spend around 16 hours a day sleeping, but this is in short spans of about 2 to 3 hours between feeds, night and day.
 - Newborns need to feed every 2 to 4 hours, again, during the day and night.
- **By around 3 months**, your baby might be having longer awake times and longer sleep periods – around 6 to 8 hours. However, they still need about 12 to 15 hours sleep every 24 hours, including sleeps during the day.

★ If you are worried, talk to your child health nurse or contact Ngala for information about sleep, comforting and settling.

Day and night

- Newborn babies don't know the difference between night and day. Over time, your baby will develop a night and day clock, and learn to sleep longer at night.
- The natural cycles of daylight and dark nights – and other patterns like being active during the day and quiet at night – also help.
- Artificial light at night – especially the blue light from TVs, phones and other screens, stimulates our brains. It makes falling asleep more difficult as it affects our body clocks and the sleep hormone melatonin.
 - Try not to expose your baby to screens.
- Sleep patterns change as your baby develops and grows, particularly over the first 5 years.
 - Just when you think your baby's patterns are predictable, learning to do something new may change the sleep pattern.



Newborn babies don't know the difference between night and day.

- Stay calm. Be flexible but consistent. Trying to calm your baby the same way for 2 or 3 days before you try a new method may help.

Comforting your baby

- Follow your baby's signals, rather than watching the clock.
 - Don't expect your baby to feed or sleep at set times of the day or night. Your baby is an individual, and as your baby develops, their needs will change.
 - When you understand and respond calmly and gently to your baby's signals, you are developing a secure attachment. This is important for your baby's emotional and physical development, now and in the future (see page 6).
- In the first months, your baby needs lots of cuddles, feeding and rocking. As your baby gets a little older, you can develop a bedtime routine that allows for a quiet, calm time before bedtime.
 - Bedtime routine such as a bath, short story and lullaby may help your baby wind down and prepare for sleep. These need to be appropriate for your baby's age and flexible if things change.
- Try putting your baby in the cot when they are calm and sleepy, rather than completely asleep.
 - Some babies enjoy calm, rhythmic and gentle patting or touch.
 - Some enjoy you making a gentle 'shhhh' sound with the patting.

Wrapping your baby and sleeping bags

Wrapping is a safe way to help babies settle and sleep on their back for the first 2 months.

If you wrap your baby:

- Always place your baby on their back for sleep.
- Do not cover your baby's head or face.
- The wrap should be firm but not too tight.
- The wrap should be muslin or thin cotton as your baby can get quite warm when wrapped. Make sure your baby is only wrapped up to their shoulders, and not dressed too warmly under the wrap.
- Stop wrapping your baby as soon as they start learning to roll.
- An alternative to wrapping is a safe infant sleeping bag. Sleeping bags keep your baby warm and there are no blankets to kick off or cover their head.

If you use a sleeping bag, make sure:

- it's the correct size, with a fitted neck, armholes and no hood
- dress your baby according to room temperature
- you don't use blankets.

Baby slings

If you use a sling or carrier, make sure your baby is held tight in an upright position with their face in view, and that they can breathe freely.

Follow **TICKS** for safe use:

- **T – Tight:** Sling should be **tight enough** to hug your baby close to you
- **I – In view:** The top of your baby's head should be **in view** at all times
- **C – Close** enough to **kiss** top of their head
- **K – Keep** their chin off the chest
- **S – Support** you baby's back so their tummy and chest are against you.

Find out more at Red Nose Australia – **Using slings and baby carriers.**

Crying

- Crying is one way your baby lets you know that they need help.
 - See page 22 for more about crying and settling your baby.
- If your baby becomes distressed, pick them up for a cuddle until they're calm or asleep, before putting them back in the cot.
- Be calm, loving and responsive, particularly when your baby is crying and at settling times. This will help develop a sense of security and calm, which will help your baby go to sleep.

Dummies and thumbs

Sucking for comfort starts very early on. Some babies suck their thumbs before they're born!

- Many babies seem happier with a dummy or thumb, and sucking can help them feel secure and have a settling effect.
- Wait until breastfeeding is working well, usually at around 4 to 6 weeks old.
- Only offer a dummy when you are sure your baby isn't hungry, and don't give your baby a dummy to make them wait for a feed when hungry.
- Check the dummy regularly. Don't use a worn dummy – babies can choke on any bits. Replace them often.
- Never tie a dummy around your baby's hand, neck or cot. This is dangerous because it could go around the baby's neck and choke them.
- Never put anything sweet on the dummy, even before your baby has teeth – this can lead to tooth decay.
- Never force your baby to take a dummy.



Safe sleep

Sudden Unexpected Death in Infancy (SUDI) is when a baby dies and the cause is not immediately obvious. It includes Sudden Infant Death Syndrome (SIDS).

How to sleep your baby safely

1. Sleep baby on back

- Your baby will find it easier to breathe.
 - It reduces the risk of suffocation, choking and overheating.
- #### 2. Keep head and face uncovered:
- This reduces the risk of overheating.
 - Put your baby's feet at the bottom of the cot so they can't slip down under the bedding.
 - Use lightweight bedding, and tuck in firmly, but only up to the chest. Or use safe baby sleeping bags instead of bedding.
 - Remove any jewellery, amulets (like amber beads), and head coverings (hats and beanies).
- #### 3. Keep baby smoke and vape free before and after birth.
- Keep the car, home and anywhere your baby spends time, a smoke and vape free zone.
 - If you want to quit smoking or vaping and you're finding it hard, ask for help (see page 39).
- #### 4. Provide a safe sleeping environment, night and day.
- Use a safe cot that meets the Australian Safety Standards.
 - Keep cot away from hanging cords from blinds or mobiles.
 - Keep cot away from appliances such as heaters and fans.
 - Use a safe mattress that is the correct size for the cot – firm, flat and clean, and not tilted.
 - Use safe bedding – no pillows, sheepskins, doonas, loose bedding, bumpers or toys, and no hot water bottles, electric blankets or wheat packs.
- #### 5. Sleep baby in their own safe sleeping place in parents' room for at least the first 6 months and up to 12 months.
- #### 6. Breastfeed your baby.
- Your baby can start having some solid food after 6 months (see page 26).
 - Put your baby in their cot after feeding, before you accidentally fall asleep with them in your bed or chair.

Source: Red Nose Australia.



Image: Red Nose Australia



Need more information or help?

- Child health nurse
- Ngala
- Raising Children Network
- Red Nose Australia





Crying is the main way babies communicate. It is how babies show they're hungry, tired, uncomfortable – or just need comfort.

Generally, **healthy** babies cry most at around 6 to 8 weeks, decreasing as they get older – around 3 to 4 months.

Every baby has their own crying pattern and it's normal for babies to cry some of the time.

- Some babies can be settled for most of the day.
- Some babies cry at the same time each day or night.

However, it is not healthy for babies to cry for long periods of time.

How to soothe a crying baby

When your baby cries, they need you to respond before they get too distressed. Sometimes a baby's crying can be very difficult to soothe.

It may take time to get to know the best way to settle your baby. One of the most important things you can do is simply to be with your baby.

Babies feel safe and secure when you interact with them in warm, loving and responsive ways. **You can't spoil your baby by picking them up, cuddling them or talking to them.**



Feed your baby whenever you think they're hungry, and pick baby up to offer comfort when they're crying.

Here are some ideas for soothing a crying baby, after checking that your baby isn't hungry, tired or has a dirty nappy:

- skin-to-skin contact, cuddling and patting
- wrapping in a lightweight wrap
- carrying in arms, a sling or carrier in upright positions
- repeating soothing words, singing or listening to quiet music, while gently rocking baby
- a warm bath or a gentle massage
- offering a feed – sucking is very comforting
- burping your baby during or at the end of each feed
- reducing noise and activity.

When babies cry more than expected

- If you are worried about the type of crying, how long your baby cries for or if you can't seem to soothe your baby, talk to your child health nurse, Ngala Parenting Line or your doctor.
- If your baby keeps crying and has a fever, rash, is vomiting, or is not feeding well, take them to your doctor or the hospital, or call 000.

Colic

Colic is when a **healthy** baby cries for long periods of time and may:

- have periods of fussiness, followed by periods of calmness
- have a flushed face, pull their legs up to their tummy, and be arching their back
- have excessive wind.

★ Even though it's quite common, we don't really know what causes colic, but if it's hard or impossible to soothe your baby, talk to your child health nurse, Ngala or your doctor. They can rule out any more serious conditions, and provide support and information.

NEVER shake your baby

- It is very important not to hit or shake babies.
- Shaking your baby can cause brain damage.
- If you are feeling very angry or upset, put your baby somewhere safe and take a break until you feel calmer.

i Need more information or help?

- Child health nurse
- Your doctor
- Ngala
- Raising Children Network

Looking after yourself and your baby

When babies are unsettled and cry a lot this can be upsetting and stressful for parents.

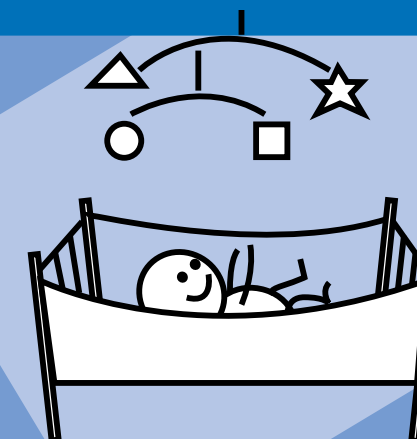
You may feel helpless at not being able to soothe your baby.

- If your baby is crying a lot, it's OK to have a short break, as long as your baby is somewhere safe. If you can, get your partner or a friend/family member to help (see page 42).
- If you feel unsupported, overwhelmed, frustrated or angry, contact your child health nurse, Ngala Parenting Line (9368 9368) or your doctor to help manage these feelings and keep baby safe.
- If you think you may shake or hurt your baby or yourself – put baby in a safe place like a cot – and get help immediately by contacting Crisis Care (08) 9223 1111 or 1800 199 008.

★ If you believe that someone's life is in immediate danger, call 000.

★ Getting help is an important part of looking after yourself and your family. **If you just can't cope or are worried that you'll hurt your baby, call Beyond Blue 1300 224 636.**

Have a short break, as long as baby is somewhere safe.





Breastfed babies
have soft poo.

When your baby is very young, feeding will seem to be the main thing you do during wake times.

It's an important time for you and your baby to get to know each other, so take your time and enjoy being with your new baby.

For some babies, feeding goes well from the start. For others, learning this new skill takes time and practice. Be patient, and ask for help if you need it.

Breastfeeding

Breast milk is the ideal food for babies.

Breast milk contains all the nutrients your baby needs for their health, growth and development for around the first 6 months. It's good for mum's health too, and it helps you to connect with your baby.

Not all mums and babies find breastfeeding easy at first. There are some common problems that breastfeeding mums can experience, but with the right help at the right time, these problems can usually be solved.

Your child health nurse or the free, 24-hour **Breastfeeding Helpline (1800 686 268)** can help you to achieve your breastfeeding goals.

- Make yourself comfortable before starting a breastfeed. Relax your shoulders and arms, using pillows or cushions if needed.

- Hold your baby close with their body facing you and their nose opposite your nipple. This way, they can take a good mouthful of the nipple and the surrounding areola (brown area).
 - If your baby is not attached properly, it can be painful and your nipples can get sore, plus your baby's not getting enough milk.
- Let your baby feed from one breast until they've stopped sucking, then offer the other side if they want it.
- When your baby has had enough, they may come off the breast by themselves. If your baby's gone to sleep, put your finger in the corner of their mouth to gently break the suction, then take them off.

In the early months, your baby might want 8 to 12 breastfeeds every 24 hours.

- Breast milk is easy to digest and babies have small stomachs.
- All young babies feed at night, as well as during the day.
- Night feeds release more of the hormones that help your body make enough milk for your baby.

Feeding usually takes less time as a baby gets older but it is important to work out what suits your baby. Some babies like to feed quite often, and others like longer sleep times – they are all different.

Your baby will show you if they need a feed, such as searching for the breast, mouthing and sucking their hands, or becoming restless. Crying is the last signal that your baby needs to be fed, not the first.

What you eat, drink, smoke or vape is passed through your breast milk to your baby and can affect your baby's health and development. If you're breastfeeding, it's safest for your baby if you don't drink alcohol, smoke or vape, or use other drugs, including marijuana.

Breastfeeding – the early weeks

The more your baby feeds, the more milk you will make. It's OK to give a top-up breastfeed if your baby still seems hungry.

Your nipples may be tender in the first few weeks as you and your baby learn to breastfeed, but should improve.

★ If your nipples continue to be sore or cracked, it's probably because your baby is not attaching well. Talk to your child health nurse or the Breastfeeding Helpline for help.

Not all crying is hunger. Your baby may just need a cuddle or a walk in the pram. They might be crying because they're overtired. Try settling your baby to sleep and wait until they wake to feed them (see page 22).

Looking after yourself

Try to get as much rest as possible while you're adjusting to life with a new baby. Accept offers of help from your partner, family and friends.

Join an early parenting group and your local Australian Breastfeeding Association group for support.

Expressing and storing breast milk

You can express your breast milk for others to give to your baby if you can't be with them all the time. Express after a feed, or instead of a feed if your baby is not with you.

- You might need to express between feeds for some time to increase your milk supply.
- You can express milk by hand, or with a pump. There are many types of pumps – some work by hand and some with an electric motor. Ask your child health nurse, Australian Breastfeeding Association counsellor or a lactation consultant for more information.
- Put breast milk into a clean, sealed, food-grade and BPA-free plastic bag, baby bottle, plastic cup with a secure lid or small glass jar, and write the date on it.

Use expressed breast milk within:

- 6 to 8 hours at room temperature (under 26°C)
- 3 days kept at the back of the fridge where it's coldest (not in the door).
- frozen
 - 2 weeks in the freezer compartment inside a fridge
 - 3 months in the freezer of a fridge with a separate freezer door
 - 12 months in a deep freeze.

Thaw milk in the fridge or by standing it in warm water.

- If thawed in the fridge, use within 24 hours.
- If thawed in warm water use straight away, or within 4 hours if kept in the fridge.
- Never refreeze thawed breast milk.
- Never use a microwave oven to thaw or heat milk as it can damage the goodness of the milk and cause hot spots which can burn your baby's mouth.
- If your baby leaves any milk, throw it away – you can't use it for another feed.

Balancing breastfeeding and work

Going back to work doesn't have to mean the end of breastfeeding. Here are some possible options:

- Work part-time, at least at first, or try to fit your working hours around your baby's needs. See if you can do some work from home.
- You can express milk at work, store it in a fridge then take it home to be fed to your baby the next day. The carer can use a cup or a bottle for this. You and your baby can continue to enjoy breastfeeds when you are home.
- Your baby may be happy to have more breastfeeds before and after work. This is great 'together' time after a day apart.

i Need more information or help?

- Child health nurse
- Breastfeeding Helpline (1800 686 268)
- Raising Children Network

**Alternatives to breast milk**

Breast milk is the natural food to feed babies, even when they are unwell.

If you and your baby are having problems breastfeeding talk to your child health nurse, Australian Breastfeeding Association counsellor or lactation consultant, ideally before you stop breastfeeding or decide to use infant formula, as this could reduce your breast milk supply.

Many mothers feel disappointed if they're not able to keep breastfeeding. This is a normal feeling. Remember that any breast milk is better than none, and formula-fed babies grow and develop well. You can still have lots of skin-to-skin time with your baby during feeding.

What is infant formula?

Most infant formula is made from cow's milk, modified to be as much like breast milk as possible. **It's not the same as ordinary cow's milk.**

Infant formula is the only safe alternative to breast milk for the first 12 months. Don't give your baby ordinary cow's milk as a main drink until they're at least 12 months old.

You may need a special formula if your baby has a medical condition. In this case, your doctor will help you choose the right infant formula.

You can find out more about infant formula and bottle-feeding at Raising Children Network (search 'bottle-feeding').

**Six-week check with your doctor**

It is important to see your family doctor 6 to 8 weeks after your baby is born.

At this visit, your doctor will check your baby to make sure your baby doesn't have any medical conditions or developmental problems.

Your doctor will also check 'mum' to see that she's OK too, including checking for signs of post-natal depression, and offering help if required (see page 43).

This is also a good time to:

- catch up on any health screening that might have been missed during pregnancy, such as a cervical screening test
- discuss immunisations for you and your baby
- discuss family planning (planning or avoiding pregnancy)
- ask any questions (start writing these down before your appointment).



Remember to take your baby's Purple Book with you.

Immunisation**Why immunise my baby?**

Immunisations are a simple and safe way to protect everyone, including your baby, against many diseases that can cause serious illnesses and sometimes death.

- Many serious diseases are rare in Australia today because of immunisation.
- If you and your baby are immunised, it will prevent you from getting or passing on these diseases to others, especially young babies who are not yet fully immunised.
- When more babies, children and adults are immunised, these infectious diseases are less likely to spread in the community.





When should my baby be immunised?

- Your baby's first immunisation may have been given in hospital.
- Your baby will need immunisations at 6 to 8 weeks, at 4 months, and throughout childhood.

Where can I get free immunisation?

Ask your child health nurse, doctor, or Aboriginal Medical Service about your baby's **free** immunisations.

Visit healthywa.wa.gov.au/immunisation to find your local immunisation clinic, as well as information about immunisations.



Check your baby's Purple Book for a list of immunisations and when they are due.

Bring your Medicare card and your baby's Purple Book (which has your child's immunisation record card in it) to all your immunisation appointments.

i Need more information or help?

- Child health nurse
- Your doctor
- healthywa.wa.gov.au/immunisation
- health.gov.au/immunisation

When to see your doctor

It's always OK to visit your doctor if you think your baby is ill.

You know your baby best. If you notice something is not right, or if you are worried about your baby's appearance or behaviour, don't be afraid to phone or visit your doctor.

Even if the doctor tells you nothing is wrong – at least it may set your mind at rest. But if you're still worried, it's OK to visit the same or another doctor, or to call *healthdirect*.

You can talk to a health professional at any time, day or night, at *healthdirect* on **1800 022 222**.

★ Call 000

If your baby is so ill that you think they need urgent medical attention, don't hesitate to call 000.

Call 000 if your child is unresponsive, or has symptoms including strong pain, dehydration, drowsiness, seizures or fitting, difficulty breathing, pale, blotchy or blue skin, or a rash that doesn't fade when you press their skin.

★ **See your doctor immediately or go to hospital Emergency** if your baby has a fever (a temperature above 38°C), is feeding poorly, vomiting a lot and/or weeing less than usual.



When to get help

It's OK to put yourself first.

The early months are important. A good start is vital for you and your baby. Talk to your child health nurse or doctor if things become too hard, if you are worried about your own health, or your baby's health or development. It can be difficult to know what's 'too hard', particularly if this is your first baby.

★ You should get help if:

- you are unhappy a lot of the time
- your baby cries a lot of the time and is difficult to settle
- your baby doesn't respond to sounds
- your baby doesn't cry or call out for feeds
- your baby is not developing or growing well
- you feel you're not getting any sleep at all
- your baby seems fine but you worry about them a lot of the time.



i Need more information or help?

- Child health nurse
- Ngala
- PANDA
- Beyond Blue



Daily care

Good hygiene habits make your baby feel more comfortable and help keep everyone healthy.

Young babies can't easily fight infections, so you need to protect them from germs and viruses that can cause sickness. There are germs and viruses on hard surfaces, in body fluids (saliva, snot, poos and wees), on people's hands, and in the air if someone sick sneezes or coughs nearby.

Stopping germs from spreading

Make sure everyone washes their hands before they hold your baby. If people are unwell, discourage them from being near or holding your baby.

If your baby or other children in the house have runny eyes, ears or noses, clean their faces and hands as often as needed. Wash your own hands afterwards. This will help stop the spread of sickness and make the children feel more comfortable.

Wash your own hands with soap and water before preparing or eating food, after using the toilet, blowing your nose, getting body fluids (saliva, snot, wees and poos) on your hands, and changing nappies.

At home, cleaning with detergent and water, followed by rinsing and drying will remove most of the germs and viruses from hard surfaces, such as the kitchen bench and plastic toys. You don't need special cleaners.

Bathing

When to bath your baby

- A good time to bath your baby is usually after feeding, especially if they're unsettled. Most babies find having a bath very relaxing and have a good sleep afterwards.
- You only need to bath your baby 2 or 3 times a week. You can use wet cotton wool or a clean washcloth to wash their face and bottom between baths.
- You only need to wash your baby's hair 1 or 2 times a week.

Getting ready

- You can use a baby bath, sink or basin.
- Have everything ready – towels, clean washcloth or cotton wool, clean clothes and nappy.
- Always use warm water – not hot. Run some cold water through the tap, after filling up the bath.
- Test the water before you put your baby in. The water should be body temperature – a little cooler than most adults like, and no more than 38°C.
- Only fill the bath 5 centimetres deep.

You only need to use water – however, baby shampoo and baby bath lotions are OK.

Do not use talcum powder anywhere on your baby, including their genitals as your baby can breathe in the powder. Cornstarch-based powders can also make rashes worse.

How to bath your baby

- Always keep your baby's nose and mouth above the water.
- While your baby is very small, wash their face before you put them in the bath.
 - Hold your baby securely, face-up, with their head and neck supported over the bath and their body under your arm. Use a clean washcloth or wet cotton wool.
 - This is also a good way to wash and rinse their hair if needed.
- Once your baby is older and easier to hold, it's easier to wash their face in the bath.
- Some babies don't like being undressed for the bath.

Try wrapping your baby in a towel or nappy, then let this float away once they're in the water. Supporting your baby securely with your arm and hand, gently move them in the water to get used to the feel of it.

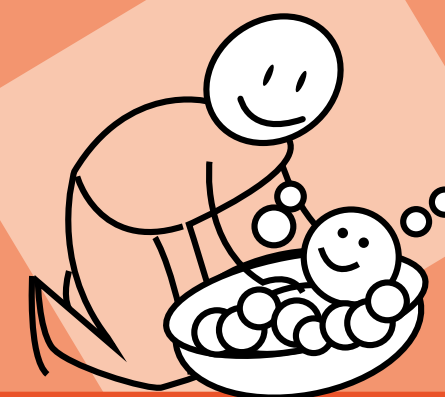
You can also bath or shower with your baby – but this may be easier with another person to help. Make sure the water is only warm, and keep your baby's face away from the water.

Sometimes babies cry when they come out of the bath.

- Have a dry and warm towel close by to wrap and gently dry your baby with.
- Try massaging your baby with baby oil or sorbolene cream.

Never leave your baby, or any child, alone in the bath.

Babies can drown in less than 5 centimetres of water. If you need to leave the bath area – even for a second – take your baby with you (wrapped in a towel).



Bath your baby
2 or 3 times a week.

Face and head

- Wash your hands well.
- Soak cotton wool or a clean washcloth in warm water.
- **Eyes:** Clean the corners of your baby's eyes, wiping gently from the inside corners to the outside corners. Use a new cotton wool for each eye.
- **Nose:** Wipe around each nostril gently to get rid of mucus (snot). **Never stick anything inside your baby's nostrils** (including cotton buds).
- **Ears:** Wipe behind your baby's ears and around the outside of each ear. **Never stick anything inside your baby's ears** (including cotton buds).
- **Mouth:** Clean your baby's mouth right from birth by wiping their gums after feeds using a damp, clean washcloth when they're awake. This will help your baby get used to cleaning and ready for tooth brushing when teeth start to come through.
- **Skin:** Wipe under your baby's chin and neck, making sure you wipe between any folds of skin. Gently pat your baby's skin dry using a soft towel. Make sure you dry under skin folds and behind the ears.

If your baby gets upset when you clean their face, try talking or singing to them.



Cleaning the nappy area

Cleaning the nappy area every time you change a nappy helps protect your baby's skin and prevent nappy rash.

- **Girls:** Wipe from front to back when cleaning your daughter's vulva. You don't need to clean inside her vagina.
- **Boys:** Clean your son's penis during nappy change and in the bath. You don't need to pull back your son's foreskin for cleaning at this age.

(Read more about nappies and their contents on page 34.)

Your baby's skin

Healthy skin helps to stop germs and viruses getting inside our bodies and making us unwell.

This is really important for newborns because they are not able to easily fight infections and they need to be protected from germs that can cause illness.

You can look after your baby's skin by:

- keeping baby clean and dry – bathing and changing wet and dirty nappies
- washing your own hands before touching your baby and after changing nappies
- looking for rashes, dry areas or sores when bathing and changing nappies.

★ **See your doctor if there are any breaks, rashes or weeping sores on your baby's skin.**



Common skin conditions

Some rashes and spots are normal and don't need treatment. It is common for babies to have dry skin. You can help by avoiding soap and using moisturisers.

Cradle Cap

Cradle cap is the yellow, greasy scaly patches that appear on the scalp of some young babies. It is common, harmless and usually clears up by the age of 2 years.

Milia

Milia are tiny white lumps that sometimes come up on baby's skin soon after birth. They are caused when dead skin from the top layer of skin gets trapped below the skin's surface. You don't need to do anything – the lumps will go away without any treatment.

★ **See your doctor if you see any redness, swelling or crusting around the lumps.**

Heat rash

Heat rash happens because a baby's sweat glands are not properly developed. The glands get blocked if the baby gets too hot and sweat gets trapped under the skin, forming small lumps or blisters. Babies often get heat rash in hot weather, if they are overdressed or have a fever.

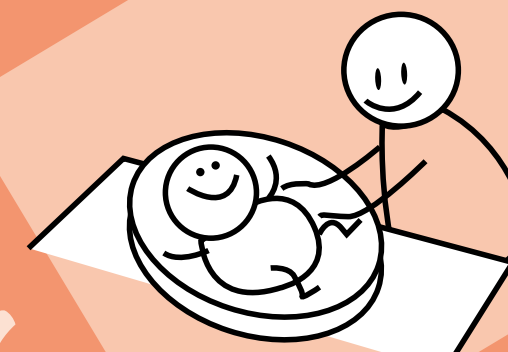
★ **See your doctor if:**

- the blisters are filled with pus
- the rash lasts more than 3 days
- your baby has a rash, is feeling unwell, has a fever or isn't feeding well
- you are worried.

Eczema

Eczema is common in babies and children. Children with eczema have dry, sensitive skin and get red, itchy, scaly patches on their skin.

★ **See your doctor if you think your child might have eczema.**



Look after baby's skin by keeping baby clean and dry.

Nappy rash and Thrush (See page 35)

Scabies

Scabies are tiny mites that burrow into the skin and cause red, itching bumps or blisters in the skin. Scabies can spread through everyone in the house. In children, the rash usually affects the face, scalp, palms and soles of feet. It is important to get treatment for scabies, usually from the pharmacist.

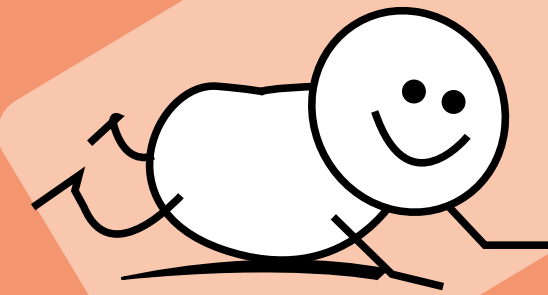
Skin problems that need treatment

★ **See your doctor as soon as possible if your baby:**

- has weeping sores on their skin (clean the area with soap, cover with a dressing)
- shows signs that their throat is sore (like crying when they swallow), and that their joints are sore (like crying when they move). Some germs in skin sores can get into baby's blood and make them very sick (such as rheumatic heart disease).

i Need more information or help?

- Child health nurse
- Your doctor
- Raising Children Network
- *healthdirect*



Babies wee less often as they get older ...

Nappies and their contents

You will spend quite a lot of time changing nappies now that you're a parent. Here are some things you might want to know.

Is my baby's poo normal?

Babies' poos vary a lot in colour, consistency and frequency.

- The poo will vary a lot with how your baby is fed.
- Breastfed babies have soft poo that looks a bit like seedy mustard, often yellow-orange or greenish. It may shoot out and look frothy at times.
- The poo smells quite sweet.
- In the first few weeks, breastfed babies poo a lot, often every feed time. After a couple of months, this may settle to once every few days or so.
- Formula-fed babies tend to have firmer, smellier poos and pass them less often when the baby is young. They vary a lot in colour and range from fairly liquid to paste-like. A change in formula may change the poos.

Need more information or help?

- Child health nurse
- Raising Children Network

Is my baby constipated?

Babies often appear to put a lot of effort into pooing. They can go red in the face, grunt or cry and strain with great concentration and then pass a normal soft poo. This is not constipation and as your baby gets older, they'll react less to body functions.

Constipation is when the poo is so hard and dry that it is difficult to pass, and your baby may become upset.

★ If it looks like pebbles or you notice a streak of blood on the poo from a small tear in the anus, talk to your doctor or child health nurse.

Fully breastfed babies don't get constipated, but it can be common with babies on infant formula. Make sure you're making the formula correctly. If your formula-fed baby is constipated, try giving some cool, boiled tap water in between formula feeds. If your baby is only breastfed, they don't need any extra boiled water.

Does my baby have diarrhoea?

It may be diarrhoea if the poos become more runny (even watery) and frequent than normal for your baby. This may mean they have a gut infection, especially if your baby's vomiting too.

★ In this situation, see your doctor immediately or call **healthdirect** on 1800 022 222.

How many wet nappies will there be?

Young babies wee a lot – 10 or more times a day. They often wee when you take off their nappy or start to put a dry one on. Your baby has no control over when they poo or wee, so don't take it personally if they wee on you during a nappy change!

- Babies wee less often as they get older, but still at least 6 times a day. Plenty of wee is good because it shows that your baby is getting enough to drink.
- Disposable nappies can absorb a lot of moisture without feeling wet, so check the weight of the nappy rather than how wet it feels.
- Check that the wee is a pale colour. In hot weather, or if your baby is not feeding well, the wee may be a darker yellow and smelly. An extra feed may help, but if you think your baby is unwell, see your doctor.

How can I avoid nappy rash?

Baby wee is clean and doesn't usually smell unless it's been in the nappy for a while.

When this happens the wee turns to ammonia which can irritate the skin. This is why it is important to change the nappy regularly and wash your baby's skin (see page 32).

- Nappy rash is common and can happen no matter how often you change nappies. Almost all children who wear nappies get nappy rash at some stage.
- Clean your baby's skin gently with water using a clean washcloth or wet cotton wool. If you use baby wipes choose ones without alcohol to avoid stinging especially if there's already a rash. After cleaning, put on lots of Vaseline, zinc cream or other nappy cream to keep wetness away from their skin.
- Try to leave their nappy off for a while during playtime to allow air to your baby's skin.

Thrush

Thrush can grow in the nappy area once a rash has developed. This will show as a very red area with spots around it.

★ See your doctor if your baby develops a rash in their nappy area that doesn't go away in a few days. Your doctor might prescribe a special cream which clears this type of rash quickly.

When will my baby be ready to toilet train?

Most children are **NOT** ready to control their poo and wee until they are 2 or even 3 years old.

Spitting up, reflux and vomiting

Spitting up

Young babies tend to bring up small amounts of milk just after a feed – this is sometimes called ‘spitting up’.

The amount is usually quite small, though it can look bigger than it is. Sometimes the milk also comes out through the baby’s nose, but it’s not a problem.

Spitting up makes a mess, means extra washing and can smell, but usually doesn’t worry the baby.

If your baby seems happy, is growing normally and feeding well, you don’t need to worry. It will improve as your baby gets older.

Reflux

Reflux happens when the muscle at the opening of the stomach does not work very well, so milk and stomach acid can go back up. This might result in spitting up but doesn’t usually hurt your child. Some babies can have reflux without spitting up – you can hear your baby swallowing it back down.

Most reflux is mild, and babies grow out of it.

★ If your baby often brings up big spurts of milk, or you are worried about your baby spitting up, see your doctor who will help you to manage the reflux. In rare cases, reflux can lead to complications, such as gastro-oesophageal reflux disease (GORD). Again, the doctor will work with you on the best way to treat your baby.

Vomiting

When a baby vomits, they bring up milk or food with force, often in large amounts. This is different from spitting up and often upsets the baby (and you!). Most babies will vomit sometimes and are fine, but vomiting can be a sign of illness.

★ If your baby is vomiting and seems unwell, is irritable, has a fever or diarrhoea, or just keeps on vomiting, see your doctor as soon as possible.



Coping with a ‘spitty’ baby

Spitting up is normal and doesn’t need treatment if it doesn’t bother your baby.

- Try shorter feed times more often (so their tummy is less full and there is less pressure on the muscle at the opening of the stomach).
- Try feeding your baby in an upright position.
- Keep your baby fairly upright for 20 to 30 minutes after feeds. Be careful not to jostle or jiggle your baby while the food is settling.
- Place your baby on their tummy in between feeds, if your baby is awake and an adult is with them.

Need more information or help?

- Child health nurse
- Your doctor
- Raising Children Network



Safety

One of your most important jobs is to keep your baby safe.

Stay close to your baby and regularly make sure your baby’s environment is safe.

Babies learn new skills very quickly. Before you know it, they will begin rolling, crawling, walking and exploring their environment.

Be one step ahead of your baby and do safety checks of:

- your home
- other homes and places you visit
- the places where:
 - your baby sleeps
 - you bath your baby
 - you change nappies
 - you feed and play with your baby
- the car.

Home safety

Falls

Falling off change tables or other high places during nappy change is one of the most common accidents for new babies.

Always keep one hand on your baby or change your baby on the floor.

Hot drinks and food

Hot drinks and food can burn your baby as badly as fire does, so never hold your baby while you are having hot food or drinks, or while cooking.

Choking

Remove all small objects within your baby’s reach.

Poisoning

Keep all medicines, essential oils, cleaning products and other poisons (including alcohol and cigarettes) up high and locked away. Put them away immediately after you’ve finished using them.

★ Keep the Poisons Information Centre number (13 11 26) in your phone.

House fires

Make sure your house has smoke alarms – test your smoke alarms every month.

- Change the batteries every year on 1 April if your alarm is not wired in.

One of your most important jobs is to keep your baby safe.



Furniture and electric appliances

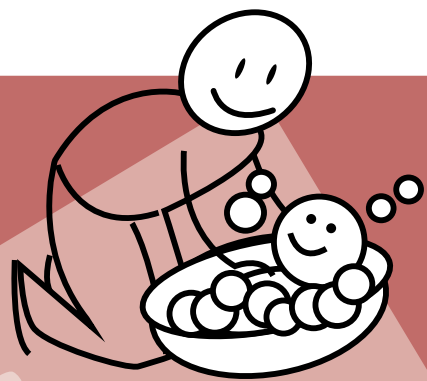
- Make sure you keep batteries, electric appliances and cords out of reach.
- Be particularly careful with button batteries as these can badly burn your baby's throat and insides.
- Secure TVs, drawers, bookcases to the wall, if possible, so they can't be pulled over. In most cases you can do this if you rent, but talk to your landlord first.

Baby equipment

- Check that your pram, cot and other baby equipment are safe and meet Australian standards. Follow the instructions carefully.
- Be particularly careful with second hand equipment.

Water safety

- Never leave your baby or any children alone around water.
- Make sure there is no uncovered water in the house or garden. This includes:
 - containers such as nappy buckets
 - pet water bowls
 - pots that might fill with water after rain
 - ponds and wading pools.
- Make sure that swimming pool fences and gates are working properly.
- Take extra care in the bath. (See page 30 on bathing your baby.)



Never leave your baby alone around water.

Heat and sun safety

Babies are very sensitive to over-heating and sunburn.

Time of day

- UV (ultraviolet) radiation levels show when the sun is most likely to cause skin damage. In summer, levels are highest between 9 am and 4 pm. You can check the UV levels for your area using the SunSmart app (www.myuv.com.au).
- Keep your baby out of direct sunlight, especially when the UV radiation level is 3 or above.

Shade

- Your baby can still get burnt and overheated in the shade.
- Regularly check that your baby is out of direct sunlight.
- Cover your baby, even in the shade:
 - Long sleeves and long pants made of cotton are the best choice for babies.
 - Wide brimmed hats and sunglasses protect baby's eyes.
 - Use sunshades for prams that let through air, and window shades in your car.
- When your child is under 6 months, it's best not to use sunscreen regularly – use shade, clothing, hats and sunglasses.
 - If you need to use sunscreen on uncovered skin – such as face, ears and fingers – use one labelled 'for babies' and always test the sunscreen on a small area of your baby's skin to check for any reactions.



Image: Britax Australia

Car safety

Heat

- Never leave your baby alone in a car.
 - If you have to leave your car, **always take your baby with you.**
 - It can quickly get very hot inside a car, even on a cloudy day or if the car is in the shade.

Restraints

Your baby must travel in an approved, properly fitted baby restraint that is:

- rear-facing – baby faces backwards in the car
- properly adjusted to fit.

For more information on babies and car safety including hiring and fitting restraints visit Kidsafe WA (kidsafewa.com.au).

Pet safety

- **Never leave your baby alone with animals** – even a much loved and gentle old cat or dog can behave differently around a new baby or children.
- Introduce pets gradually to your baby.
- Always wash your hands after handling any pets.

Smoking and vaping

Cigarette smoke and e-cigarette vapour are bad for everyone, especially babies.

- If you smoke or vape, one of the best things you can do for you and your baby's health is to quit.
- If anyone smokes or vapes around your baby, your baby is smoking or vaping too.
- Smoking and vaping increases your baby's risk of:
 - Sudden Unexpected Death in Infancy (SUDI)
 - ear and chest infections
 - asthma, coughing and wheezing
 - long term damage to lungs, brain and blood.

In Western Australia it is against the law to smoke:

- in a car carrying children
- within 10 metres of children's playground equipment.

E-cigarettes and vapes can contain nicotine and other harmful chemicals, so do not leave or use them around your baby or other children.

★ **If you need help to stop smoking or vaping talk to your doctor or pharmacist, or call the Quitline on 13 78 48.**

Alcohol and other drugs

If you're affected by alcohol or other drugs, you may not be able to properly care for your baby. And alcohol or other drug use can also have negative side effects like mood swings, depression and anxiety, making it hard for you to tune in to your baby's physical and emotional needs. It can also affect your relationship with your partner, making it hard for you to work together to care for your baby.

Alcohol, cigarettes, vapes and other drugs are also toxic to babies and children – even small amounts can lead to death. Treat alcohol and other drugs the same way you treat other poisons:

- Keep substances up high and locked away.
- Wash your hands after use, and before handling your baby.

If you are breastfeeding, it's safest for your baby if you don't drink alcohol, smoke or use other drugs as these are passed on to your baby through the breast milk.

In an emergency

They don't happen every day, but accidents do happen.

- It's a good idea to take a first aid course and learn how to do CPR. (CPR is first aid for when someone isn't breathing properly, or their heart has stopped.)
 - Raising Children Network has information on CPR for babies under 12 months.
- Keep a list of emergency phone numbers in your phone or in a handy place.
- ★ In an emergency call 000.

Need more information or help?

- Child health nurse
- Kidsafe WA has a lot of child safety information and workshops.



Parenting

Becoming a parent is a significant life event that leads to lots of changes. You might feel a bit overwhelmed at first, and it takes time to adjust. If partners work together, it will be easier.

Birth mothers need time to rest and recover from the birth. Changing hormone levels, sleep patterns and adjusting to a new role can make mothers feel more vulnerable, sensitive and easily upset. Partners may need time to process the birth experience if it was very different from what they expected.

Relationships and priorities change. Someone depends on you for their survival. This can be exciting, but also demanding and scary.

- You might worry about how well you're doing.
- You will get lots of advice from lots of people. This can be helpful but can make you worry more.
- As you get to know your baby, you will become more confident about what will work best for them.

Partners may have different ideas about parenting. It's important to talk through issues and come to agreements about how you parent.

Parenting teamwork is good for you and good for your baby. It's about communication, shared decision-making and positive problem-solving.

As you get to know your baby, you will become more confident.



Dads and partners play a unique and important role in children's development and are just as capable as meeting a newborn's needs as the birth mother, even if it's in a different way. As long as baby feels safe and loved, these differences are good for brain development.

You can help each other settle into your new roles by:

- trying to understand the challenges your partner is facing
- doing your share around the house
- giving lots of encouragement and praise
- practising parenting skills – bathing, changing clothes and nappies, settling your baby
- spending lots of time getting to know your baby
- offering your partner self-care time while you get to know your baby
- recognising that you each have an important role to play as a parent
- taking care of yourself as well as your partner.

Remember you are not alone – talk to your partner, family, friends, workmates, or an appropriate professional. Nobody was born an expert at parenting and we are all learning every day.

And accept offers of help – you don't need to do everything yourself.

If you or your partner have any questions about parenting, you're welcome to speak to your child health nurse. Your child health nurse will also be able to refer you to other appropriate support.



Partners play a unique and important role.



Looking after yourselves

One of the best things you can do for your baby is to take care of yourselves.

It takes a lot of physical and emotional energy to care for a baby.

If you are too tired, it can be hard to look after your baby. If you are worried and stressed your baby may sense it and may not settle or relax.

Don't feel guilty about taking some time for yourselves – you and your baby both deserve it!

- Eat well, especially if you are breastfeeding. Have easy, healthy snacks and try to eat at least 3 times a day.
- Rest as much as you can while your baby sleeps (or take turns with your partner). Try not to use all this time to catch up on housework or other things.
- Get some exercise and fresh air. Take your baby for a walk every day, if possible.

- Do something nice for yourselves every day. Even a quiet coffee or a few minutes phoning a friend helps.
- Take a break away from your baby sometimes. Take turns having a break if you have a partner, or find someone you trust to mind your baby, even if only for half an hour.
- Don't try to be perfect. Accept offers of help from people you trust.
- Take care of your relationship. Spend some time as a couple talking about something other than your baby.
- Join a group – chat with other parents.

★ **If caring for your baby is getting you down, or you are feeling tearful and depressed, see the next page and talk to your child health nurse.**

Postnatal depression, the baby blues and anxiety

Having a baby is joyful and amazing, but it's also hard work – especially at first.

There may be times when you (mothers and partners) feel sad, flat, tired or uptight.

These are normal responses to the changes in your lives a new baby brings.

Baby blues

Most women will feel tired and overwhelmed soon after giving birth. You might also feel relief, happiness, fear and joy.

You might feel teary and anxious 3 to 5 days after birth – this is called the 'baby blues'. The 'baby blues' last for only a few days.

★ **If these feelings don't go away or are badly affecting your daily life, please talk to a health professional.**

Postnatal depression

Postnatal depression can affect mothers and partners.

★ **If you have any of the following symptoms for 2 weeks or more within the first year of having your baby, talk to a health professional:**

- finding it difficult to go to sleep, not sleeping well, or waking early (not just because of your new baby)
- not feeling like eating
- crying or teary a lot of the time
- feeling that you can't cope
- feeling anxious or fearful most of the time
- afraid of being alone with your baby
- having problems with your memory
- thinking that you're not a good parent
- thinking that there's something wrong with you
- not having the energy to do anything.

Everyone needs help sometimes

Sometimes, just the support of a loving partner or family may be enough to help you feel better.

However, if the symptoms above don't go away, talk to a health professional you trust, such as your doctor or child health nurse. They can give you information and suggest options to help and support you during this time.

Anxiety

It's normal to feel sad or worried when our lives change and having a baby is a huge change!

Who am I?

When you have your first baby, you take on the role of parent – and all that comes with it. You're no longer 'just' a 'teacher', 'gardener' or 'whoever' – at least for a while – and that can be hard. Be patient with yourself while you go through this period of change.

★ **If you think your partner or baby would be better off without you, or are thinking about hurting yourself, your family or your baby, get help immediately (see page 50).**

If you believe someone's life is in immediate danger, call 000.



So much to do

Having a baby takes a lot of energy, and when you're exhausted this can lead to feeling of depression or anxiety.

In the past, the family and even whole villages were involved in raising children.

Today, it often falls on a couple or a single parent to do this important job. Sometimes it can feel a bit much!

Being a parent is one of the most important and demanding jobs there is. But we often don't recognise the time and energy it takes.

i Need more information or help?

- Child health nurse
- Your doctor
- Beyond Blue (1300 224 636)
- Perinatal Anxiety and Depression (PANDA) Helpline (1300 726 306).
- For more information or advice see page 50.

What can I do about depression and anxiety?

- Talk about your feelings with your partner or a health professional you trust, such as your doctor or child health nurse.
- Join a parenting group to find people you can talk to.
- Don't blame yourself or others for feeling this way.
- Don't expect too much of yourself – set yourself small goals and take each day at a time.
- Follow your doctor or other health professional's advice.
- Try to keep up your daily routine, including doing things you enjoy or find relaxing.
- Stay in contact with friends and family.

Older children

A new baby brings big changes for everyone in the family, especially young children.

It can be both exciting and a stressful time, particularly for toddlers who might find it hard to understand what's happening.

If you have another child (or children), you will have less time for them after your baby arrives. Be sensitive to their feelings, listen and give them lots of affection – it will help to build their self-esteem and confidence.

When mum is in hospital

- Give your child as much contact with you as possible. Even if they cry when they have to leave, it is better for them to see you and know where you are.
- Make your child feel special – concentrate on them rather than the baby during the visit.
- Send a special photo and message just to your child.
- Give them a photo of you and something of yours to look after while you're away.
- Give them a present 'from the baby' and help them make or choose a present for their new brother or sister.

When baby comes home

Expect some change in your child's behaviour, no matter how well prepared they are. Be patient – it takes time to adjust, especially as the baby will be getting more attention.

In particular, toddlers may act younger for a while, such as needing help when eating, dressing or toileting, or wanting to be carried.

Your toddler may watch the baby breastfeeding and want to breastfeed too. If you prefer not to breastfeed your toddler, explain that breast milk is specially made for the baby, but offer them a special 'big kids' drink or snack.



Help your child adjust

Your child may use challenging behaviour and be more emotional around the baby to get attention, especially when you're feeding your baby.

Name your child's emotions for them. For example, tell them, 'I know you feel cross when I am feeding the baby and you want to play. I wish I could play with you too. We'll play when baby's finished feeding.'

- Arrange special activities for them while you feed the baby – a teddy or a special toy, or tell them a story.
- Read stories about new babies, which show the older child feeling both happy and sad about the new baby.
- Praise your child for being co-operative and focus on good behaviour. Try to ignore less desirable behaviour if there are no safety issues.
- Involve your child in caring for the new baby – so they see themselves as a big sister or brother who helps look after the baby.



Challenging behaviour

Your child may use challenging behaviour and be angry around the baby to get attention, especially when you're feeding your baby.

- Teach your toddler to touch the baby gently, but always be there to make sure your baby is safe.
- Let your child know that aggressive behaviour is not allowed. If your child hits the baby, remove them and say, 'You are feeling very cross, but I won't let you hit.'
- Don't let your child hit you either – teach them that hitting is not the way to show angry feelings.



Take time to enjoy your grandchild.

Special time

Show your child that you enjoy being with them.

- Make a special time just for your older child every day, no matter how short.
- Go out with your child and get someone else to mind the baby sometimes.

Grandparents and other carers

Congratulations on becoming a grandparent (or auntie, uncle or other regular carer). It is the beginning of a new, exciting relationship.

Now that you have a new grandchild, there are a few things to think about:

- Ask your grandchild's parents what support they need and tell them what you can give. Respect their need for family time with their new baby.
- Be positive around the parents of your grandchild – they're getting to know their new baby and learning a new role.
- Offer advice when asked, but don't be offended if it is not acted on. Every family is different.
- Try to avoid criticism.

Be patient and stay calm if there is conflict. Sleep deprivation can make it difficult for new parents to communicate clearly.

Take time to enjoy your grandchild

Babies are born ready to make connections with the important people in their world. Talking and playing with your grandchild builds a connection between you and your grandchild and helps their development.

Need more information or help?

- Child health nurse
- Department of Communities (Grandfamilies)
- Wanslea Grandcare Program

Being a grandcarer

Grandcarers raise their grandchildren full-time. This may have been planned, or it may be the result of a crisis or unplanned event.

If you've become a grandcarer, there are some things to think about and do:

- Look after yourself so that you can care for you grandchild. Eat well, rest when you can, and accept offers of help.
- Provide for your grandchild's immediate needs such as food, bedding and clothing.
- Clarify your legal position regarding your grandchild.
- Work out if you are able to – and want to – take on the parenting role, and what support you need.
- Get financial assistance.
- Get current information about child health and development from your child health nurse.
- Deal with any special needs of your grandchildren.

Child care

At some stage, you may want or have to place your baby in someone else's care – child care.

There are different kinds of child care, so you need to find the right kind for you and your baby.

You need to think about:

- How many hours of care do I need? Is it regular or just occasional?
- Do I want my baby cared for in a home or in a centre?
- How many staff are there and are they qualified and experienced?
- Do I want the service to provide lunch?
- Does the centre provide nappies for children under the age of 2?
- Can I claim any costs back?

Need more information or help?

- See page 51 for information about child care.



Sexual relationships after childbirth

Having a baby doesn't mean the end of your sex life.

These are huge changes for both of you, especially the lack of sleep. It's hard to want to make love if you are always tired!

How a woman responds to her sexual self after giving birth depends on many things. If a woman had a difficult birth (especially stitches), it can take time before she is ready for sex, and this is normal.

Women's bodies change shape during pregnancy and again after the birth. 'Sexual' body parts change function. Breasts now provide breast milk – they may leak milk when their baby cries, between feeds or when making love. This is completely normal.

On top of these changes, your lifestyle is changing too. Taking care your baby and getting to know them takes up a lot of energy!

Partners will experience changes too. It can be difficult to know where they fit in now, and some partners may even feel left out.

When one of you wants to make love, the other might not want to, or not be ready. Partners may feel hurt, rejected and confused. Talking and listening with your partner about your feelings will help you both understand what's happening in your relationship.

There are many ways of giving and receiving sexual pleasure. Think about sex as the end point, rather than the beginning. Start with simple things like holding hands and cuddling. Physical affection can build and lead to sex when you are both ready.

Coping with change will be different for every couple. This is a very important time for the future of your family, so keep talking to each other to work through the challenges, and you will achieve a loving emotional and sexual life together.

Need more information or help?

- Child health nurse
- Your doctor
- Raising Children Network

Is your relationship with your partner OK?



Family and domestic violence

What is family violence?

Family violence is when a family member threatens, harms, controls or abuses another family member.

Intimate Partner Violence is when this type of abuse occurs within an intimate relationship.

Family violence is sometimes also called domestic violence, intimate partner violence or domestic abuse.

Relationships that weren't working well before your pregnancy or birth can become worse.

Your relationship will affect your baby's growth and development

To grow, develop and thrive, babies need to feel loved, safe and secure. If they don't feel this way, it can affect their growth and development in many ways, now and in the future.

If you're a parent experiencing family violence, it can also affect your relationship with your baby. It can make it difficult for you to care for your baby's everyday needs, and to give your baby the love and attention they need.

If this is your situation, it's important to know that family violence is never your fault. The person using family violence is responsible for it and the way it affects your family.

★ It is important to get help as soon as possible if this is happening.

★ If family violence is happening in your home, you need to get help.



Do you and your partner have a good relationship?

- **I feel safe.** I don't worry that my partner will hurt my body or my feelings.
- I can say 'no' for sex.
- **My partner respects me.** My partner feels what I say, how I feel, what I think is important.
- My partner is happy if I want to **see my family and friends.**
- I can honestly say what I think. If I don't want something, **I can say 'no'.**
- My partner and I **decide things together.** I feel I have the **same power as my partner** in my relationship.

This good feeling is for everyone.

Everyone has the right to a healthy relationship.

Maybe your partner does not make you feel good like this.

If you or your child are in immediate danger, call the police on 000.

The partner who is abused

You and your baby have a right to be safe. You are not responsible for this violence and abuse.

★ If you're scared or living in fear of your partner, think about your safety and the safety of your baby. You may need to make a safety plan.

You can find services to help you with this safely and in confidence, as well as provide support, on page 50 or call 1800RESPECT.

Need more information or help?

1800RESPECT

(24 hours, 7 days) 1800 737 732

Support for people experiencing, or at the risk of experiencing, violence and abuse, their friends and family.

The partner who abuses

If you bully or abuse your partner, or find it hard to control your anger, you can learn non-violent ways to deal with your feelings. Being a good parent includes being a good non-abusive role model for your children.

If you think you could be a danger to your family, leave until you have calmed down.

★ Talk to someone who understands the problem of family violence or phone a family violence helpline. There's lots of support if you need it – see page 50 or call MensLine Australia.

Need more information or help?

MensLine Australia

(24 hours, 7 days) 1300 789 978
mensline.org.au

Free counselling service offering support for Australian men anywhere, anytime.

Contact	How we can help
Emergency	
Ambulance, Fire, Police	000 For emergency and life-threatening situations
Poisons Information Centre	13 11 26 If you think someone's been poisoned, including medicines, drugs, chemicals, plants, bites and stings
Parenting information	
Raising Children Network	raisingchildren.net.au Information for raising healthy, happy children
Ngala Parenting Line (8am–8pm 7 days)	ngala.com.au 9368 9368 or *1800 111 546 Counselling, information and support for families
Support for parents and carers	
Diverse families	raisingchildren.net.au/ grown-ups Information for all kinds of families, including single parents, LGBTIQ+, co-parents, and much more
Playgroup WA	playgroupwa.com.au 9228 8088 or *1800 171 882 Find and join a playgroup near you
Multiple Birth Association	mbawa.org.au / 6458 1536 For families raising multiple birth children
Grandcare	wanslea.org.au *1800 794 909 For grandparents raising grandchildren
Crisis and other support (24 hours, 7 days)	
Crisis Care Helpline	*1800 199 008 For people in crisis, needing urgent help
1800RESPECT	*1800 737 732 For anyone experiencing, or at the risk of experiencing, violence and abuse
MensLine Australia	1300 789 978 mensline.org.au Free counselling service offering support for Australian men anywhere, anytime
Men's Domestic Violence Helpline	*1800 000 599 For men concerned about violent and abusive behaviours AND/OR who have experienced family and domestic violence
Women's Domestic Violence Helpline	*1800 007 339 For women and children experiencing family and domestic violence, including safe accommodation
DVassist	dvassist.org.au Family and domestic violence help in regional Western Australia
Alcohol and Drug Support Line	9442 5000 *1800 198 024 For anyone concerned about their own or another person's alcohol or other drug use
Mental Health/Postnatal depression	
PANDA - Perinatal Anxiety and Depression Australia	panda.org.au For anyone affected by anxiety and depression during pregnancy and early childhood
ForWhen Helpline	forwhenhelpline.org.au 1300 24 23 22 Access the help you need to better manage mental health challenges as they occur
beyondblue (24 hours, 7 days)	beyondblue.org.au 1300 224 636 Crisis counselling and information on mental health, depression, anxiety, postnatal depression
Lifeline (24 hours, 7 days)	lifeline.org.au 13 11 14 Crisis support if you are experiencing a personal crisis or thinking about suicide
Breastfeeding	
Australian Breastfeeding Association Helpline (24 hours, 7 days)	breastfeeding.asn.au *1800 686 268 Breastfeeding support from trained counsellors. Information on breastfeeding including local support groups, breast pump hire.
Breastfeeding Centre of WA	6458 1844 kemh.health.wa.gov.au If you are having problems with breastfeeding
Obstetric Medicines Information	6458 2723 Safe use of medicines in pregnancy/breastfeeding

Contact	How we can help
Child health and safety	
Purple book appointments (8.30am–5pm Mon–Fri)	cahs.health.wa.gov.au/ PurpleBook 1300 749 869 Book your Purple Book Appointments by phone or register online (Perth metropolitan only)
Child Health Centre (you may need an appointment)	healthywa.wa.gov.au/ service-search Find your nearest Child Health Centre
Child Development Service	cahs.health.wa.gov.au/ ChildDevelopment (metro) wacountry.health.wa.gov.au/ ChildDevelopment (non-metro) Services for children with, or at risk of developmental difficulties and delay
Immunisation clinic (you may need an appointment)	healthywa.wa.gov.au/ immunisation Find your nearest Immunisation Clinic for free childhood vaccinations.
Kidsafe WA	kidsafewa.com.au 6244 4880 Help keep babies and children safe at home, on the road and at play
Red Nose Australia	rednose.org.au Safe sleeping, tummy time and safe wrapping information
Bright Tomorrows	brighttomorrows.org.au Free App to help build young brains
Health and medical services	
healthdirect (24 hours, 7 days)	healthdirect.gov.au *1800 022 222 Health advice with a registered nurse. Online health information
Quitline (8am–8pm Mon–Fri)	13 78 48 Help to quit smoking and vaping
Sexual Health Quarters	shq.org.au 9227 6178 or *1800 198 205 Information and services on contraception, pap smears, planned and unplanned pregnancy, period problems and sexual difficulties
Child care	
Starting Blocks	startingblocks.gov.au Finding the right child care for you
Child Care Subsidy	servicesaustralia.gov.au/ child-care-subsidy Child Care Subsidy and how to claim it
Translation/communication (24 hours, 7 days)	
Translating and Interpreting Service (24 hours, 7 days)	13 14 50 Phone if you need an interpreter. You need the name and phone number of the agency you want to contact.
National Relay Service (24 hours, 7 days)	accesshub.gov.au TTY: 133 677 Voice Relay: 1300 555 727 The National Relay Service (NRS) can help you if you're d/Deaf or find it hard to hear or speak to hearing people on the phone.

***Freecall:** Calls made from a mobile may be charged at a timed rate.

i Find this information online:





Have your say

We welcome feedback, both positive and negative.
It helps us provide you with a better service.

If you have any compliments or complaints about your child health appointment,
please tell a staff member or contact:

- **Metropolitan:** cahs.health.wa.gov.au/cahsfeedback
- **Country:** wacountry.health.wa.gov.au/feedback
- **Care Opinion:** You can also share your feedback anonymously
(without your name) at CareOpinion.org.au

Your New Baby magazine – what do you think?



This magazine is how we provide information to families in WA.
Because every family is different, your feedback can help us
make it better for other parents.

Please scan the QR code or visit
cahs.health.wa.gov.au/magazine to let us know what's useful,
what we should remove, and what we missed out.

This document can be made available in alternative formats on request for a
person with a disability. Please contact: childcommunity@health.wa.gov.au